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## Final Examination Medical Experts Urge Wider Use of Autopsies To Confirm Diagnoses

Many Murders Are Said Now  
To Go Undetected; Data  
On Lung Cancer Disputed

Attica and Chappaquiddick

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NEW YORK—The woman's body was found lying in a large pool of blood. Evidence of a severe blow to the head was unmistakable. To those who discovered the corpse, there was only one conclusion: murder.

Then came the autopsy. As Dr. John F. Devlin, the pathologist assigned to the case, examined the brain, heart and other organs of the dead woman, it became clear that she had suffered a heart attack, and apparently struck her head against a table as she fell to the floor. "First impressions (of the cause of death) are awful," Dr. Devlin says.

In his role as New York City's deputy chief medical examiner, Doctor Devlin is in a position to know. The office of the city's medical examiner investigates thousands of deaths each year, he says, adding that initial, on-the-spot determinations of cause of death—even by police and physicians—are wrong 25% of the time.

Dr. Devlin's assertion spotlights a situation some medical specialists claim to be one of the worst medical-legal disgraces in the nation. For while the autopsy (or postmortem examination) is one of the oldest procedures in medicine, it is performed following only about 20% of the nearly two million deaths in the U.S. each year. And if the autopsy frequently uncovers errors, these specialists say, it follows that there may be thousands of murders, suicides and accidents that remain undetected.

### Inaccurate Death Statistics?

Dr. John M. Prutting, head of the Foundation for the Advancement of Medical Knowledge here in New York, goes further. Advocating increased use of autopsies, he says that tens of thousands of death certificates are, in all probability, each year recording erroneous medical diagnoses. And this situation, Dr. Prutting asserts, considerably clouds the accuracy of the national death statistics upon which so much medical research is based.

Dr. Prutting's assertion raises important questions about the diagnostic skill of many doctors. As an example, he notes a recent study indicating that physicians attributed a large number of deaths to lung cancer prior to detailed autopsies that showed the primary cancer was in another organ. "It may be we don't know the real effect of smoking," Dr. Prutting says. (The alleged link between smoking and lung cancer is a theory based on a chain of evidence of smokers and lung cancer.)

The U.S.'s 20% autopsy rate is markedly low when compared with those of many other parts of the world: the figure is 80% in Switzerland, for example, and almost 100% in areas of Russia. The fact that the autopsy has never been widely used in the U.S. can be attributed to a variety of factors—including, critics say, medical laziness—but an important consideration has been the traditional wish of attending physicians to spare survivors prolonged intervals between the death and the burial of deceased relatives.

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